

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 NEW PIONEERS PAC

ADDRESS (number and street) 228 S WASHINGTON ST STE 115 ALEXANDRIA VA 22314 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00459123 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [ ] AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, May 20, Aug 20, Nov 20, Mar 20, Jun 20, Sep 20, Dec 20, Apr 20, Jul 20, Oct 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 04 01 2017 through 04 30 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Lisker, Lisa, , , Type or Print Name of Treasurer

Signature of Treasurer Lisker, Lisa, , , [Electronically Filed] Date 05 19 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**NEW PIONEERS PAC**

Report Covering the Period: From:  /  /  To:  /  /

|  | COLUMN A<br>This Period                | COLUMN B<br>Calendar Year-to-Date      |
|--|--|--|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2017"/>  | <input type="text" value="159718.00"/> | <input type="text" value="159718.00"/> |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="211338.34"/> |  |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="24500.00"/>  | <input type="text" value="268474.50"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="235838.34"/> | <input type="text" value="428192.50"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="15701.94"/>  | <input type="text" value="208056.10"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="220136.40"/> | <input type="text" value="220136.40"/> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>      |  |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <input type="text" value="0.00"/>      |  |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**NEW PIONEERS PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
04 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y  
04 / 30 / 2017

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 13500.00                      | 93500.00                          |
| (ii) Unitemized .....   | 0.00                          | 250.00                            |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 13500.00                      | 93750.00                          |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 11000.00                      | 162500.00                         |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 24500.00                      | 256250.00                         |
| 12. Transfers From Affiliated/Other Party Committees.....   | 0.00                          | 11783.20                          |
| 13. All Loans Received .....  | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00                          | 441.30                            |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds  |                               |                                   |
| (a) Non-Federal Account (from Schedule H3).....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....  | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..   | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶                         | 24500.00                      | 268474.50                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 24500.00                      | 268474.50                         |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....   | 9701.94                       | 49556.10                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 9701.94                       | 49556.10                          |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 5000.00                       | 112500.00                         |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 1000.00                       | 1000.00                           |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 1000.00                       | 1000.00                           |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 45000.00                          |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 15701.94                      | 208056.10                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 15701.94                      | 208056.10                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 24500.00                              | 256250.00                                 |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 1000.00                               | 1000.00                                   |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 23500.00                              | 255250.00                                 |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 9701.94                               | 49556.10                                  |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 441.30                                    |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 9701.94                               | 49114.80                                  |

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 6 OF 17  |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**NEW PIONEERS PAC**

**A. Britton, Janet, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2215 S Evergreen Ave.  
 City Gonzales State LA Zip Code 70737  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EATEL Occupation (for Individual) General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 21 / 2017  
**Transaction ID : SA11AI.8841**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Ehrlich, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1007 Kennedy St.  
 City Falls Church State VA Zip Code 22046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Total Spectrum Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 21 / 2017  
**Transaction ID : SA11AI.8857**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

**C. Goddard, Rhonda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2869 170th Ave.  
 City Penokee State KS Zip Code 67659  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Nex-Tech Occupation (for Individual) CFO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 21 / 2017  
**Transaction ID : SA11AI.8843**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 3000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 7 OF 17  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**NEW PIONEERS PAC**

**A. Hoopes, Allen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 226  
 City Freedom State WY Zip Code 83120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Silver Star Communications Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2017  
**Transaction ID : SA11Al.8847**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Jones, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 397 Westgate Dr.  
 City Sulphur State OK Zip Code 73086  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Chickasaw Telephone Occupation (for Individual) Senior VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2017  
**Transaction ID : SA11Al.8855**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

**C. McCarty, Cullen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5131 N Maple Grove Rd.  
 City Bloomington State IN Zip Code 47404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Smithville Communications Occupation (for Individual) Executive VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2017  
**Transaction ID : SA11Al.8849**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 4000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 8 OF 17  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**NEW PIONEERS PAC**

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. McCarty, Darby, , ,</b>                |                                     | Date of Receipt<br>MM / DD / YYYY<br>04 / 21 / 2017 |
| Mailing Address PO Box 261  |                                     | <b>Transaction ID : SA11AI.8859</b>                 |
| City<br>Ellettsville  | State<br>IN                         | Zip Code<br>47429                                   |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Amount of Each Receipt this Period<br>2000.00       |
| Name of Employer (for Individual)<br>Smithville Communications  | Occupation (for Individual)<br>CEO  | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>2000.00 |   |

|   |   |   |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. Nordwind, William, , ,</b>             |   | Date of Receipt<br>MM / DD / YYYY<br>04 / 12 / 2017 |
| Mailing Address 406 5th St. SE  |   | <b>Transaction ID : SA11AI.8838</b>                 |
| City<br>Washington  | State<br>DC                             | Zip Code<br>20003                                   |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer (for Individual)<br>Venable LLP  | Occupation (for Individual)<br>Attorney | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00      |   |

|   |   |   |
|---|---|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. Scanlan, John, , ,</b>               |   | Date of Receipt<br>MM / DD / YYYY<br>04 / 21 / 2017 |
| Mailing Address 10440 Shadow Lake Dr.   |   | <b>Transaction ID : SA11AI.8853</b>                 |
| City<br>Geismar   | State<br>LA                             | Zip Code<br>70734                                   |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>2000.00       |
| Name of Employer (for Individual)<br>EATEL  | Occupation (for Individual)<br>Chairman | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br>2000.00     |   |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 4500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 9 OF 17  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**NEW PIONEERS PAC**

**A. Smith, Todd, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10121 Captain Hickory Pl.  
 City Great Falls State VA Zip Code 22066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Total Spectrum Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2017  
**Transaction ID : SA11AI.8851**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

**B. Todd, Jimmy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25209 US Hwy 283  
 City Lenora State KS Zip Code 67645  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Nex-tech Occupation (for Individual) General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2017  
**Transaction ID : SA11AI.8845**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 2000.00  |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 13500.00 |

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 17  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**NEW PIONEERS PAC**

**A. CHS/COMMUNITY HEALTH SYSTEMS, INC. POLITICAL ACTION CMTE (CHS PAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 MERIDIAN BLVD  
 City FRANKLIN State TN Zip Code 37067  
 FEC ID number of contributing federal political committee. **C** C00485896  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2017  
**Transaction ID : SA11C.8861**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B. HCA INC. GOOD GOVERNMENT FUND**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 550  
 ONE PARK PLAZA  
 City NASHVILLE State TN Zip Code 37203  
 FEC ID number of contributing federal political committee. **C** C00067231  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2017  
**Transaction ID : SA11C.8864**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. PPL PEOPLE FOR GOOD GOVERNMENT**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address TWO NORTH NINTH STREET  
 GENTW2  
 City ALLENTOWN State PA Zip Code 18101  
 FEC ID number of contributing federal political committee. **C** C00228106  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2017  
**Transaction ID : SA11C.8863**  
 Amount of Each Receipt this Period  
 3500.00  
 Memo Item

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 11000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 11000.00 |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEW PIONEERS PAC**

**A. ADP**

Full Name (Last, First, Middle Initial)

Mailing Address 1 ADP Boulevard

City Roseland State NJ Zip Code 07068

Purpose of Disbursement Payroll Service

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 07 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.8868**

Amount of Each Disbursement this Period: 115.95

Memo Item

**B. ADP**

Full Name (Last, First, Middle Initial)

Mailing Address 1 ADP Boulevard

City Roseland State NJ Zip Code 07068

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 27 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.8871**

Amount of Each Disbursement this Period: 935.73

Memo Item

**C. American Express**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 360001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 05 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.8867**

Amount of Each Disbursement this Period: 46.84

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1098.52

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEW PIONEERS PAC**

**A. American Express**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 360001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement  
Credit Card Payment- See Memos

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 20 / 2017

FEC Identification Number  
C  
Transaction ID : SB21B.8870  
Amount of Each Disbursement this Period  
6474.60

Memo Item

**B. Vic and Anthony's**

Full Name (Last, First, Middle Initial)  
Mailing Address 1510 Texas Avenue

City Houston State TX Zip Code 77002

Purpose of Disbursement  
Event Catering

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 20 / 2017

FEC Identification Number  
C  
Transaction ID : SB21B.8870.1  
Amount of Each Disbursement this Period  
330.00

Memo Item

**C. Alaska Airlines**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 24948

City Seattle State WA Zip Code 98124

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 20 / 2017

FEC Identification Number  
C  
Transaction ID : SB21B.8870.  
Amount of Each Disbursement this Period  
324.20

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6474.60

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEW PIONEERS PAC**

Full Name (Last, First, Middle Initial)  
**A. American Airlines**

Date of Disbursement: MM / DD / YYYY  
04 / 20 / 2017

Mailing Address: 4333 Amon Carter Boulevard  
MD 5675

City: Fort Worth State: TX Zip Code: 76155

Purpose of Disbursement: Travel

Candidate Name:

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : SB21B.8870.  
Amount of Each Disbursement this Period: 366.20

Memo Item

Full Name (Last, First, Middle Initial)  
**B. American Airlines**

Date of Disbursement: MM / DD / YYYY  
04 / 20 / 2017

Mailing Address: 4333 Amon Carter Boulevard  
MD 5675

City: Fort Worth State: TX Zip Code: 76155

Purpose of Disbursement: Travel

Candidate Name:

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : SB21B.8870.1  
Amount of Each Disbursement this Period: 3013.60

Memo Item

Full Name (Last, First, Middle Initial)  
**C. American Airlines**

Date of Disbursement: MM / DD / YYYY  
04 / 20 / 2017

Mailing Address: 4333 Amon Carter Boulevard  
MD 5675

City: Fort Worth State: TX Zip Code: 76155

Purpose of Disbursement: Travel

Candidate Name:

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : SB21B.8870.  
Amount of Each Disbursement this Period: 17.78

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEW PIONEERS PAC**

**A. Avis Rent A Car**

Full Name (Last, First, Middle Initial)

Mailing Address 3400 E Sky Harbor Blvd.

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 20 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8870.2

Amount of Each Disbursement this Period: 459.80

Memo Item

**B. Hilton Irvine**

Full Name (Last, First, Middle Initial)

Mailing Address 18800 MacArthur Blvd.

City Irvine State CA Zip Code 92612

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 20 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8870.2

Amount of Each Disbursement this Period: 297.29

Memo Item

**C. Hampton Inn Roanoke**

Full Name (Last, First, Middle Initial)

Mailing Address 27 Church Avenue SE

City Roanoke State VA Zip Code 24011

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 20 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8870.

Amount of Each Disbursement this Period: 292.46

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEW PIONEERS PAC**

**A. Doubletree Hilton**

Full Name (Last, First, Middle Initial)

Mailing Address 15747 John F Kennedy Blvd

City Houston State TX Zip Code 77032

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 20 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8870.1

Amount of Each Disbursement this Period: 630.77

Memo Item

**B. Wade, Hamlin, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2238 Edenton Rd

City Charlotte State NC Zip Code 28211

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8872

Amount of Each Disbursement this Period: 2046.40

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 2046.40 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 9619.52 |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                             |                              |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c           | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEW PIONEERS PAC**

**A. Handel for Congress Inc.**

Full Name (Last, First, Middle Initial)  
Handel for Congress Inc.

Mailing Address 4010 Old Milton Pkwy

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement Political Contribution

Candidate Name Handel, Karen, , ,

Office Sought:  House  Senate  President

Disbursement For: 2017  Primary  General  Other (specify) Runoff

State: GA District: 06

Date of Disbursement 04 / 20 / 2017

FEC Identification Number C C00633362

Transaction ID : SB23.8876

Amount of Each Disbursement this Period 5000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 5000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 5000.00 |

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b            | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input checked="" type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**NEW PIONEERS PAC**

**A. CEP America**

Full Name (Last, First, Middle Initial)

Mailing Address 2100 Powell St.  
Ste. 920

City Emeryville State CA Zip Code 94608

Purpose of Disbursement Refund of Contribution Orig Date 3/31/2017

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB28A.8935

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 1000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 1000.00 |